## STATEMENT OF ORGANIZATION

MAR 3 0 2005

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEE

		(See Reverse Side For In	structions)	
	This is a (check one)	Party Committee	Political Action Committee	
	This is an (check one)	Initial Statement	Amended Statement	
COMMITTEE		(PLEASE TYPE OR I	PRINT)	
Name Kansa	s American Family	Insurance Political Acti	on Committee	
	ess (Street, City, State, errowhead Road Top		Business Telephone ( 765 ) 273-5120	
CHAIRPERSO	ON			
Name Daran Neuschafer			Home Telephone ( 785 ) 825-9169	
Mailing Address (Street, City, State, Zip Code)  1528 E. Iron Avenue Salina, KS 67401  Business Telephone (785) 827-5150				
TREASURER		7(4)		
Name Paul N	Masterson		Home Telephone	
Mailing Addre 8020 E. Ce	ess (Street, City, State, entral Avenue, Suite	Zip Code) 140 Wichita, KS 6720	Business Telephone 06 (316 ) 634-0122	
AFFILIATED	OR CONNECTED O	RGANIZATIONS		
Name Ameri	can Family Insuranc	ce Group	10 No.	
	ess (Street, City, State, rrowhead Road, Top			
If not connected	or affiliated with an org	anization, identify the trad	e, profession, or primary interest of the contributors	
SIGNATURE				
			the best of my knowledge and	
			ntional failure to file this document	
or intentionally filing a false document is a class A misdemeanor."				
(Date)	(Date) (Signature of Chairperson)			

Governmental Ethics Commission

Rev.2000